

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

New Jersey Motor Vehicle Commission  
[Specific Office Address]  
[City, State, Zip Code]  
Subject: Renewal of Driver's License

Dear Sir/Madam,

I am writing to request the renewal of my New Jersey driver's license, which is set to expire on [expiration date]. My license number is [your license number].

I have attached the required documents for your review, including:

- A completed renewal application form
- Proof of identity
- Payment for renewal fees

Please let me know if you require any additional information or further documentation. I appreciate your attention to this matter and look forward to your prompt response.

Thank you.

Sincerely,

[Your Signature (if sending a hard copy)]  
[Your Printed Name]